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(703) 746-4000 *\``* or Fax Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 02/25/2005 020374 KUBOVCIK & KUBOVCIK Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. **SUITE 710** 900 17TH STREET NW **WASHINGTON, DC 20006** (Depositor's name) 05/26/2005 MBEYENE2 00000050 09870583 (Signature 1400.00 OP 01 FC:1501 02 FC:1504 (Date 300.00 OP FILING DATE 03 FC: APALICATION NO. CONFIRMATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. NPR-073 9221 09/870,583 06/01/2001 Masashi Ishida TITLE OF INVENTION: CLAMP FOR WINGED NEEDLE DATE DUE APPLN, TYPE **SMALL ENTITY** ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE 05/25/2005 \$1400 \$300 \$1700 NO nonprovisional EXAMINER ART UNIT CLASS-SUBCLASS 3731 606-151000 BAXTER, JESSICA R Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list KUBOVCIK & KUBOVCIK (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) NIPRO CORPORATION Osaka, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 111833 (enclose an extra copy of this form). Advance Order - # of Copies \_\_\_\_\_10 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2) The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

J. Kubovcik Rona]

Date 05/24/2005

25,401

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